

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. 09/685,432 FILING DATE _____
APPLICANT(S) _____

7-28-04						CLAIMS						7-28-04					
APPLICANT		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		APPLICANT		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		APPLICANT		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
NO	DEF	NO	DEF	NO	DEF	NO	DEF	NO	DEF	NO	DEF	NO	DEF	NO	DEF	NO	DEF
1						51						81					
2						52						82					
3						53						83					
4						54						84					
5						55						85					
6						56						86					
7						57						87					
8						58						88					
9						59						89					
10						60						90					
11						61						91					
12						62						92					
13						63						93					
14						64						94					
15						65						95					
16						66						96					
17						67						97					
18						68						98					
19						69						99					
20						70						100					
21						71											
22						72											
23						73											
24						74											
25						75											
26						76											
27						77											
28						78											
29						79											
30						80											
31						81											
32						82											
33						83											
34						84											
35						85											
36						86											
37						87											
38						88											
39						89											
40						90											
41						91											
42						92											
43						93											
44						94											
45						95											
46						96											
47						97											
48						98											
49						99											
50						100											
TOTAL NO.						TOTAL NO.						TOTAL NO.					
TOTAL DEF.						TOTAL DEF.						TOTAL DEF.					
TOTAL CLAIMS						TOTAL CLAIMS						TOTAL CLAIMS					